## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F93000005553

Title:

Name:

Address:

City-St-Zip:

DSVP

(X) Delete

AMBROSE, MICHAEL

2121 N 117 AVE

OMAHA, NE 68164

FILED Apr 04, 2008 Secretary of State

**Entity Name:** TRAVELEX AMERICA INC. **Current Principal Place of Business: New Principal Place of Business:** 2121 NORTH 117 AVE. SUITE 300 NEBRASKA, NE 68164 **Current Mailing Address: New Mailing Address:** 100 YONGE ST. SCOTIA PLAZA 14TH FLOOR TORONTO ONTARIO M5C 2W1 CANADA, ON M5C 2W1 XX FEI Number: 11-2953256 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: DPCF ( ) Delete Title: (X) Change ( ) Addition AMBROSE, MICHAEL Name: TAYLOR, LARRY Name: 100 YONGE STREET 15TH FLOOR 2121 N 117 AVE Address: Address: City-St-Zip: TORONTO ONTARIO, ON M5C 2W1 CA City-St-Zip: OMAHA, NE 68164 ( ) Delete Title: DVCF Title: DTS (X) Change ( ) Addition VERASAMY, RICHARD VERASAMY, RICHARD Name: Name: 100 YONGE STREET 15TH FLOOR 100 YONGE STREET 15TH FLOOR Address: Address: TORONTO ONTARIO, ON M5C 2W1 CA TORONTO ONTARIO, ON M5C 2W1 CA City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: RICHARD VERASAMY T 04/04/2008

() Change () Addition